

# IMPORTANT NOTICE TO ALL PHARMACIES AND PHARMACISTS

7/1/01

***PLEASE SHARE THIS INFORMATION WITH ALL YOUR STAFF***

Pharmacies and policyholders have asked the Wisconsin Health Insurance Risk Sharing Plan (**HIRSP**) to improve its method for submitting drug claims. In response, HIRSP has redesigned its drug claims processing. Beginning August 1, 2001, HIRSP will begin processing pharmacy claims with Innovative Resource Group (a subsidiary of Blue Cross & Blue Shield United of Wisconsin), working with WellPoint Pharmacy Management (WellPoint). You will benefit from these changes in the following ways:

- ❑ WellPoint's real-time claims adjudication permits you to know exactly what products are covered under the HIRSP program. It will also provide you with the HIRSP-approved reimbursement amount. In addition, you will be prompted with messaging to bill Medicare, for Medicare covered services under Plan 2.
- ❑ All HIRSP policyholders will continue to pay for their prescription(s) in full at the pharmacy but they will no longer need to submit their claims for reimbursement. All reimbursements will now automatically go directly to the policyholder, based on the claim detail processed in the WellPoint system.
- ❑ ***Effective for dates of service on and after August 1, 2001, you will submit claims to WellPoint.*** Contact your software vendor to ensure you are able to transmit to WellPoint.

In July, HIRSP will provide policyholders a sticker to place on the back of their HIRSP ID card. The sticker will carry the WellPoint logo and information on submitting claims.

## **Please note the following important changes:**

- ❑ Wisconsin Pharmacies will need to be a contracted provider with WellPoint Pharmacy Management and Wisconsin Medicaid certified to process claims for HIRSP drug card business. If you are unsure how and where you are contracted, please contact Innovative Resource Group - Pharmacy Services (414-327-8030) for additional information.
- ❑ Pharmacies outside of Wisconsin will need to be a contracted provider with WellPoint Pharmacy Management. If you are unsure of your participation status, contact WellPoint Pharmacy Management at (800) 222-7390.
- ❑ Pharmacists should submit the Members' Identification Number as found on the HIRSP ID card.
- ❑ Claim submissions to WellPoint are identical to Blue Cross & Blue Shield United of Wisconsin and CompCareBlue. In the event of an on-line transmission issue, please contact the WellPoint/Help-Line at (800) 222-7390.
- ❑ Any outstanding claims for services prior to August 1, 2001 must be submitted to HIRSP immediately. All claims after August 1, 2001 must be transmitted electronically to WellPoint.
- ❑ The following medications/supplies will not be payable under the POS program and must be billed to the HIRSP medical benefit starting August 1, 2001:
  - Disposable Medical Supplies.
    - Exception: diabetic syringes, test strips and lancets will be covered under POS.
  - Infusion Therapy.
  - Medical office or clinic injections routinely administered in a physician's office.
- ❑ The HIRSP medical claim address is:  
6406 Bridge Road, Suite 18  
Madison, WI 53784-0018

Thank you for your cooperation during this transition.

Sincerely,  
WellPoint Pharmacy Management




## JUST A REMINDER

**BEGINNING AUGUST 1, 2001, HIRSP CLAIMS MUST BE SUBMITTED TO WELLPOINT.** The following list of required data elements is useful information in preparing your system to submit claims. If you have any questions, please contact our Pharmacy Help-Line. Thank you for your cooperation.

1. Claims submission is on-line using **BIN #610053**.
2. **The member identification number as found on the member's ID card. The ID number must be submitted in accordance with NCPDP guidelines, left justified and space filled.**
3. First and Last Name of the patient (as it appears on the member's card).
4. A Processor Control Number is assigned to each software vendor. Contact your software vendor.
5. Pharmacy NABP #.
6. The following data elements are in accordance with NCPDP Ver. 3.2 guidelines:  
Patient's Date of Birth, Member's relationship code (see #7), Physician's DEA number, Quantity, Days supply, Rx number, New or Refill prescription, Gender, Date of Service, U&C, and NDC #.
7. Currently, all HIRSP enrollees are cardholders with a relationship code of 1.
7. In the unlikely event that you are unable to transmit claims via your on-line system, please call the Help-Line to verify HIRSP allowed amount and transmit the claims at a later time.
9. The WellPoint Pharmacy Help-Line can be contacted to answer any questions regarding claims processing or member eligibility. Pharmacy Help-Line: (800) 222-7390
10. Any question regarding software or system enhancements should be directed to your software vendor.

### SAMPLE HIRSP IDENTIFICATION CARD

Below is a copy of the HIRSP ID card. Please ensure that HIRSP members are presenting their new card for any prescriptions filled on or after August 1, 2001.

<b>HEALTH INSURANCE RISK SHARING PLAN</b> <b>Identification Number</b>  XXXXXXXXXX                      PLAN: XX  NAME RESIDENTIALADDRESS 1 RESIDENTIALADDRESS 2 RES CITY, RES STATE   RES ZIP  <b>Prior Authorization Requirement - See Card Back</b>	<b>IMPORTANT</b>  <small>A Wisconsin Medicaid certified or certifiable provider must provide all services. Providers are prohibited under law by Section 149.14(4m), Wisconsin Statutes, from billing the policyholder for the difference between the charge for a covered service and the amount paid by HIRSP, except for HIRSP coinsurance and HIRSP deductible. Refer to your HIRSP policy for covered services and limitations.</small>  <b>FOR QUESTIONS ABOUT HIRSP BENEFITS</b> Wisconsin Health Insurance Risk Sharing Plan 6406 Bridge Road, Suite 1B Madison, WI 53784-0018 (800) 828-4777 or (608) 221-4651  <b>FOR PROVIDERS WITH QUESTIONS ABOUT DRUG BENEFITS</b> Pharmacy Support Desk (800) 222-7390 BIN# 610053  
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